Bankruptcy2008 @1991-2008, New Hope Software, Inc., ver. 4.4.2-720 - 30931 - PDF-XChange 2.5 DE

Case 08-22433 Doc 1 Filed 08/26/08 Entered 08/26/08 10:11:13 Desc Main B1 (Official Form 1) (1/08) Document Page 1 of 50

United States Bankruptcy Court Northern District of Illinois				Voluntar	y Petition	
Name of Debtor (if individual, enter Last, First, Middle): Miranda, Rene		Name of Join	Name of Joint Debtor (Spouse) (Last, First, Middle):			
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names): None	years		mes used by the Joint Debtoried, maiden, and trade name	•	s	
Last four digits of Soc. Sec. or Individual-Taxpay (if more than one, state all): 4840	er I.D. (ITIN) No./Complete EIN	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):				
Street Address of Debtor (No. and Street, City, a 34333 Goldenrod Rd.	and State)	Street Addres	s of Joint Debtor (No. and S	treet, City, and St	ate	
Round Lake, IL	ZIPCODE 60073	ZIPCODE				
County of Residence or of the Principal Place of Lake	Business:	County of Re	sidence or of the Principal P	lace of Business:		
Mailing Address of Debtor (if different from stre	et address):	Mailing Addr	ress of Joint Debtor (if differ	ent from street ad	dress):	
	ZIPCODE				ZIPCODE	
Location of Principal Assets of Business Debtor	(if different from street address a	bove):			ZIPCODE	
Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.) Filing Fee (Check one box) Filing Fee attached Filing Fee attached Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration certifying that the debtor is may be made to pay fee except in installments. Rule 1006(b). See Official Form No. 3A. Nature of Business (Check one Business (Check one Business) Health Care Business Single Asset Real Estate as defined in 11 U.S.C. \$101 (S1B) Railroad Chapter 15 Per Recognition of Chapter 12 Chapter 15 Per Recognition of Chapter 13 Nonmain Proceed Chapter 14 Check one box Nature of Debts (Check one box) Tax-Exempt Entity (Check box, if applicable) Debtor is a tax-exempt organization under Title 2 of the United States Code (the Internal Revenue Code) Filing Fee (Check one box) Filing Fee (Check one box) Check one box: Check one box: Chapter 15 Per Recognition of Chapter 13 Nonmain Proceed Chapter 13 Nonmain Proceed Chapter 13 Nonmain Proceed Chapter 14 Check one box Spilot(8) as "incurred by an individual primarily consumer Debtor is a small business as defined in 11 U.S.C. \$101(8) as "incurred by an individual primarily for a personal, family, or household purpose." Check one box: Debtor is not a small business as defined in 11 U.S.C. \$101(8) as "incurred by an individual primarily consumer Debtor is a small business as defined in 11 U.S.C. \$101(8) as "incurred by an individual primarily consumer Debtor is a small business as defined in 11 U.S.				one box) tetition for of a Foreign ding tetition for of a Foreign detition for of a Foreign occeding Debts are primarily business debts C. § 101(51D) J.S.C. § 101(51D) ots (excluding debts		
Statistical/Administrative Information Debtor estimates that funds will be available for dist	tribution to unsecured creditors.				THIS SPACE IS FOR COURT USE ONLY	
Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.						
Estimated Number of Creditors 1-49 50-99 100-199 200-999	1000- 5000 5,001- 10,000	10,001- 25,000	25,001- 50,001- 50,000 100,000	Over 100,000		
Estimated Assets \$0 to \$50,001 to \$100,001 to \$500,001 \$1,000,001 \$10,000,001 \$50,000,001 \$100,000,001 \$500,000 \$500,000 \$500,000 \$100,000 \$500,000 \$100,00				More than \$1 billion		
Estimated Liabilities \$0 to \$50,001 to \$100,001 to \$500,001 \$1,000,001 \$10,000,001 \$50,000,00 \$50,000 to \$1 to \$10 to \$50 to \$100 to \$100,000 \$100			\$100,000,001 \$500,000,001 to \$500 to \$1 billion	More than \$1 billion		

ge 2.5 DE
- PDF-XChan
- 30931
4.4.2-720
Inc., ver.
Software,
w Hope
2008, Ne
8 © 1991-
Bankruptcy2008

B1 (Official Tag	B1 (Official Grase 081208433 Doc 1 Filed 08/26/08 Entered 08/26/08 10:11:13 Desc Main Page 2					
Voluntary Per (This page must be	tition Document completed and filed in every case)	Page of Debo(s): Rene Miranda				
	All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)					
Location Where Filed:	NONE	Case Number:	Date Filed:			
Location Where Filed:	N.A.	Case Number:	Date Filed:			
	nkruptcy Case Filed by any Spouse, Partner	•				
Name of Debtor:	NONE	Case Number:	Date Filed:			
District:		Relationship:	Judge:			
10K and 10Q) with Section 13 or 15(d)	Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. § 342(b).					
Exhibit A i	s attached and made a part of this petition.	X /s/ David P. Leibowitz Signature of Attorney for Debtor(s)	August 25, 2008 Date			
l _	n or have possession of any property that poses or is alleged whibit C is attached and made a part of this petition.	d to pose a threat of imminent and identifiable h	arm to public health or safety?			
Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.						
	Information Reg	arding the Debtor - Venue ny applicable box)				
ಠ	Debtor has been domiciled or has had a residence, princi immediately preceding the date of this petition or for a lo	pal place of business, or principal assets in this				
	There is a bankruptcy case concerning debtor's affiliate,	general partner, or partnership pending in this D	District.			
Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United Sates in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.						
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes)						
Landlord has a judgment for possession of debtor's residence. (If box checked, complete the following.)						
(Name of landlord that obtained judgment)						
(Address of landlord)						
	Debtor claims that under applicable non bankruptcy law, entire monetary default that gave rise to the judgment for	there are circumstances under which the debtor				
	Debtor has included in this petition the deposit with the operiod after the filing of the petition.					
	Debtor certifies that he/she has served the Landlord with	this certification. (11 U.S.C. § 362(1)).				

ankruptcy2008 ©1991-2008, New Hope Software, Inc., ver. 4.4.2-720 - 30931 - PDF-XChange 2.5 DE	
ankruptcy2008 @1991-2008, New Hope Software, Inc., ver. 4.4.2-	1 - PDF-XChange 2.5 D
ankruptcy2008 @1991-2008, New Hope Software,	.4.4.2
ankruptcy2008 @1991-2008, N	ope Software,
ankruptcy2008 @199	-2008, N
Д	ankruptcy2008 @199

Case 08-22433 Doc 1 Filed 08/26/08	Entered 08/26/08 10:11:13 Desc Main
B1 (Official Form 1) (1/08) Document	Page 3 of 50 Page 3
Voluntary Petition	Name of Debtor(s):
(This page must be completed and filed in every case)	Rene Miranda
Signa	atures
Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached. Pursuant to 11 U.S.C.§ 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting
X /s/ Rene Miranda	recognition of the foreign main proceeding is attached.
Signature of Debtor	T 7
Signature of Deotor	X
<u></u>	(Signature of Foreign Representative)
X	
Signature of John Debtor	
	(Printed Name of Foreign Representative)
Telephone Number (If not represented by attorney)	
August 25, 2008	<u> </u>
Date	(Date)
Signature of Attorney*	
X /s/ David P. Leibowitz Signature of Attorney for Debtor(s) DAVID P. LEIBOWITZ 1612271 Printed Name of Attorney for Debtor(s) Leibowitz Law Center Firm Name 420 W. Clayton St. Address	Signature of Non-Attorney Petition Preparer I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, 2) I prepared this document for compensation, and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. § 110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.
_Waukegan, IL 60085 _847.249.9100 dleibowitz@lakelaw.com	Printed Name and title, if any, of Bankruptcy Petition Preparer
Telephone Number	Social Security Number (If the bankruptcy petition preparer is not an individual state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) Address
Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	X
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.	Date Signature of bankruptcy petition preparer or officer, principal, responsible
X	person, or partner whose Social Security number is provided above. Names and Social Security numbers of all other individuals who prepared or
Printed Name of Authorized Individual	assisted in preparing this document unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional sheets.
Title of Authorized Individual	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11
Date	and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Official Form 1, Exhibit D (10/06)

UNITED STATES BANKRUPTCY COURT **Northern District of Illinois**

In re_Rene Miranda	Case No
Debtor(s)	(if known)

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.

Official Form 1, Exh. D (10/06) – Cont.
□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]
If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.
 □ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.] □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); □ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); □ Active military duty in a military combat zone.
☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Rene Miranda RENE MIRANDA
Date: August 25, 2008

B6 Cover (Form 6 Cover) (12/07)

FORM 6. SCHEDULES

Summary of Schedules

Statistical Summary of Certain Liabilities and Related Data (28 U.S.C. § 159)

Schedule A - Real Property

Schedule B - Personal Property

Schedule C - Property Claimed as Exempt

Schedule D - Creditors Holding Secured Claims

Schedule E - Creditors Holding Unsecured Priority Claims

Schedule F - Creditors Holding Unsecured Nonpriority Claims

Schedule G - Executory Contracts and Unexpired Leases

Schedule H - Codebtors

Schedule I - Current Income of Individual Debtor(s)

Schedule J - Current Expenditures of Individual Debtor(s)

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or it part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

B6A (Official Forth 6A) Q2/22/433	Doc 1	Filed 08/26/08	Entered 08/26/08 10:11:1
Don't (Official Form on) (12/07)		Dooumont	Dogg 7 of EO

Document Page 7 of 50

In re	Rene Miranda	Case No.	
	Debtor	(If known)	

SCHEDULE A - REAL PROPERTY

Desc Main

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C – Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Town home 34333 Goldenrod Rd. Round Lake, IL 60073		J	170,000.00	166,027.79
	I Tota	al >	170,000.00	

Bankruptcy2008 @1991-2008, New Hope Software, Inc., ver. 4.4.2-720 - 30931 - PDF-XChange 2.5 DE

(Report also on Summary of Schedules.)

B6B	Official	FGASAB	Ω&,	224	133
ROR (Official	r ormrob)	$\pi \mathbf{r}_{2}$	רדעה	

oc 1 Filed 08/26/08 Document Entered 08/26/08 10:11:13 Page 8 of 50

Desc Main

In re _Rene Miranda

Case No. _____(If known)

Debtor

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See. 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.	Х			
 Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. 		Checking Account. Washington Mutual Chicago, IL	J	100.00
Security deposits with public utilities, telephone companies, landlords, and others.	Х			
Household goods and furnishings, including audio, video, and computer equipment.		Furniture Home	J	1,000.00
 Books. Pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. 	Х			
6. Wearing apparel.		Basic Clothing Residence	Н	1,000.00
7. Furs and jewelry.	Х			
8. Firearms and sports, photographic, and other hobby equipment.	Х			
 Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. 	Х			
10. Annuities. Itemize and name each issuer.	Х			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			

Document

In re	Rene Miranda	Case No.
	Debtor	(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

		,		
TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	Х			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	Х			
14. Interests in partnerships or joint ventures. Itemize.	Х			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	Х			
16. Accounts receivable.	Х			
17. Alimony, maintenance, support, and property settlement to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	Х			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	Х			
20. Contingent and noncontingent interests in estate or a decedent, death benefit plan, life insurance policy, or trust.	Х			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights of setoff claims. Give estimated value of each.	Х			
22. Patents, copyrights, and other intellectual property. Give particulars.	Х			
23. Licenses, franchises, and other general intangibles. Give particulars.	Х			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. §101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	Х			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2007 Kawaski Ninja / 3000 Miles Home	Н	7,000.00
26. Boats, motors, and accessories.	Х			
27. Aircraft and accessories.	Х			
28. Office equipment, furnishings, and supplies.	X			

B6B	(Official	£ 366B)	81-20243	Bont DOC	•
-----	-----------	----------------	----------	-----------------	---

In re Rene Miranda

Filed 08/26/08 Entered 08/26/08 10:11:13 Desc Main 0

Debtor

Case No. _ (If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

29. Machinery, fixtures, equipment, and supplies used in business. 30. Inventory. 31. Animals. Dog Home 32. Cropsgrowing or harvested. Give particulars. 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not already listed. Itemize.	TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
31. Animals. Dog Home 32. Crops - growing or harvested. Give particulars. 33. Farming equipment and implements. X X X X X X X X X X X X X X X X X X X	29. Machinery, fixtures, equipment, and supplies used in business.	Х			
32. Crops - growing or harvested. Give particulars. 33. Farming equipment and implements. 34. Farm supplies, chemicals, and feed. 35. Other personal property of any kind not X	30. Inventory.	Х			
particulars. 33. Farming equipment and implements. X 34. Farm supplies, chemicals, and feed. X 35. Other personal property of any kind not X	31. Animals.			J	100.00
34. Farm supplies, chemicals, and feed. X 35. Other personal property of any kind not X	32. Crops - growing or harvested. Give particulars.	Х			
35. Other personal property of any kind not	33. Farming equipment and implements.	Х			
35. Other personal property of any kind not already listed. Itemize.					
	already listed. Itemize.				

9,200.00

Case 08-22433 Doc 1 Filed 08/26/08 Entered 08/26/08 10:11:13 Desc Main B6C (Official Form 6C) (12/07) 50

Document Pa	age 11 c	of t
•	ocument P	Document Page 11 (

In re	Rene Miranda	Case No	
	Debtor		(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under: (Check one box)

	11 U.S.C. § 522(b)(2)
$ \sqrt{} $	11 U.S.C. § 522(b)(3)

Check if debtor claims a	a homestead exemption that exceeds
\$136,875.	

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Town home	735 I.L.C.S 5§12-901	3,972.21	170,000.00
Checking Account.	735 I.L.C.S 5§12-1001(b)	100.00	100.00
Dog	735 I.L.C.S 5§12-1001(b)	100.00	100.00
Furniture	735 I.L.C.S 5§12-1001(b)	1,000.00	1,000.00
Basic Clothing	735 I.L.C.S 5§12-1001(a)	1,000.00	1,000.00

Case 08-22433 Doc 1 Filed 08/26/08 Entered 08/26/08 10:11:13 Desc Main Document Page 12 of 50

B6D (Official Form 6D) (12/07)

In re _	Rene Miranda	,	Case No	
	Debtor	,		known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 1170			Incurred: FEB 2008					
Chase Home Equity Line P.o. Box 24714 Columbus, OH 43224			Lien: 2nd Mortgage Security: Residence				29,841.10	0.00
			VALUE \$ 170,000.00					
ACCOUNT NO.			Incurred: 2-8-08					296.00
HSBC Bank USA, N.A. P.O. Box 2013 Buffalo, NY 14240			Lien: PMSI in vehicle < 910 days Security: Motorcycle				7,296.00	
			VALUE \$ 7,000.00	┪ .				
ACCOUNT NO. 3947			Incurred: FEB 2008					102,373.58
Wells Fargo Mortgage P.o. Box 660455 Dallas, TX 75266			Lien: 1st Mortgage Security: Residence				136,186.79	This amount based upon existence of Superior Liens
			VALUE \$ 170,000.00					
			(Total		tota		\$ 173,323.89	\$ 102,669.58
			(Total	-	Γota	ĭ➤	\$ 173,323.89	\$ 102,669.58

(Report also on

(If applicable, report Summary of Schedules) also on Statistical Summary of Certain Liabilities and Related Data.)

Bankruptcy2008 @1991-2008, New Hope Software, Inc., ver. 4.4.2-720 - 30931 - PDF-XChange 2.5 DE

Case 08-22433 Doc 1 Filed 08/26/08 Entered 08/26/08 10:11:13 Desc Main Document Page 13 of 50

B6E (Official Form 6E) (12/07)

In re_ Rene Miranda Debtor	, Case No
SCHEDULE E - CREDITORS HOLI	DING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H,""W,""J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets
Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Case 08-22433 Doc 1 Filed 08/26/08 Entered 08/26/08 10:11:13 Desc Main Document Page 14 of 50

B6E (Official Form 6E) (12/07) - Cont.

Bankruptcy2008 @1991-2008, New Hope Software, Inc., ver. 4.4.2-720 - 30931 - PDF-XChange 2.5 DE

In re	Rene Miranda	. Case No.
m re_	Debtor	(if known)
_		
Cer	tain farmers and fishermen	
Claims	s of certain farmers and fishermen, up to \$5,400* pe	r farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
□ Dom	ogita by individuals	
	osits by individuals	
	s of individuals up to \$2,425* for deposits for the punot delivered or provided. 11 U.S.C. § 507(a)(7).	archase, lease, or rental of property or services for personal, family, or household use,
☐ Tax	es and Certain Other Debts Owed to Governmen	ntal Units
Taxes	s, customs duties, and penalties owing to federal, sta	te, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
Con	nmitments to Maintain the Capital of an Insured	Depository Institution
	of the Federal Reserve System, or their predecessor	r of the Office of Thrift Supervision, Comptroller of the Currency, or Board of rs or successors, to maintain the capital of an insured depository institution. 11
Clai	ims for Death or Personal Injury While Debtor V	Vas Intoxicated
	ns for death or personal injury resulting from the operug, or another substance. 11 U.S.C. § 507(a)(10).	eration of a motor vehicle or vessel while the debtor was intoxicated from using
* Amount adjustmer	-	ery three years thereafter with respect to cases commenced on or after the date of

0 continuation sheets attached

Case 08-22433 Doc 1 Filed 08/26/08 Entered 08/26/08 10:11:13 Desc Main Document Page 15 of 50

B6F (Official Form 6F) (12/07)

In re _	Rene Miranda	 ,	Case No	
	Dobtor		(If Irnow)	n)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. XXXX American Express P.O. Box 360001 Ft. Lauderdale, FL 33336-0001			Incurred: 2-8-08 Consideration: Credit cards				6,462.00
ACCOUNT NO. XXXX American Express P.O. Box 360001 Ft. Lauderdale, FL 33336-0001			Incurred: 2-8-2008 Consideration: Credit cards				2,462.00
ACCOUNT NO. 8291 Carson Pirie Scott P.O. Box 17264 Baltimore, MD 21297			Incurred: FEB 2008 Consideration: Credit cards				953.61
ACCOUNT NO. XXXX Chase P O Box 36520 Louisville, KY 40233-6520			Incurred: 2-8-08 Consideration: Credit cards				3,220.00
2continuation sheets attached	-	-		Subt	otal	>	\$ 13,097.61
				T	otal	>	\$

Bankruptcy2008 ©1991-2008, New Hope Software, Inc., ver. 4.4.2-720 - 30931 - PDF-XChange 2.5 DE

Entered 08/26/08 10:11:13 Desc Main Case 08-22433 Doc 1 Filed 08/26/08 Page 16 of 50 Document

B6F (Official Form 6F) (12/07) - Cont.

In re _	Rene Miranda	,	Case No		
		Debtor		(If known)	

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 5871 Chase P.O. Box 15153 Wilmington, DE 19886			Incurred: FEB 2008 Consideration: Credit cards				7,469.61
ACCOUNT NO. 7026 Chase P.O. Box 15153 Wilmington, DE 19886			Incurred: FEB 2008 Consideration: Credit cards				10,012.00
ACCOUNT NO. 3543 Chase P.O. Box 15292 Wilmington, DE 19886			Incurred: FEB 2008 Consideration: Credit cards				2,764.38
ACCOUNT NO. XXXX Chase P.O. Box 15292 Wilmington, DE 19886			Incurred: 2008 Consideration: Credit card debt				29,610.00
ACCOUNT NO. 1356 Discover Card Services P.O. Box 30395 Salt Lake City, UT 84130-0395			Incurred: FEB 2008 Consideration: Credit cards				3,564.99
Sheet no. 1 of 2 continuation sheets a to Schedule of Creditors Holding Unsecured	ttached			Sub	tota	ı>	\$ 53,420.98

Nonpriority Claims

Total ➤ \$

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

Case 08-22433 Doc 1 Filed 08/26/08 Entered 08/26/08 10:11:13 Desc Main Document Page 17 of 50

B6F (Official Form 6F) (12/07) - Cont.

In re_	Rene Miranda		Case No	
		Debtor		(If known)

SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT ORCOMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF,	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 6670 Retail Services P.O. Box 17602 Baltimore, MD 21297			Incurred: FEB 2008 Consideration: Credit cards				7,296.38
ACCOUNT NO. V982 Toyota Financial Serv. P.o. Box 4102 Carol Stream, IL 60197			Incurred: FEB 2008 Consideration: Car loan				11,000.00
ACCOUNT NO. 6722 Visa P.O. Box 4521 Carol Stream, IL 60197	•		Incurred: FEB 2008 Consideration: Credit cards				5,001.65
ACCOUNT NO.							
ACCOUNT NO.							

Sheet no. 2 of 2 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal ► \$ 23,298.03 Total ► \$ 89,816.62

(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

Case 08-22433 B6G (Official Form 6G) (12/07)

Filed 08/26/08 Document

Entered 08/26/08 10:11:13 Desc Main Page 18 of 50

In re	Rene Miranda	Case No.	
	Debtor		(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

Case 08-22433 Doc 1 Filed 08/26/08

Document

Entered 08/26/08 10:11:13 Desc Main Page 19 of 50

DULL	(OIIICIA	ii i oi iii	(12/0/	,

In re	Rene Miranda	Case No.	
	Debtor		(if known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Esmeralda Miranda	Chase Home Equity Inc, PO Box 24714 Colombus, OH 43224

RELATIONSHIP(S): step-daughter, Father

DEPENDENTS OF DEBTOR AND SPOUSE

AGE(S): 12, 72

Married

Debtor's Marital

None

Status:

In re_	Rene Miranda	Casa		
	Debtor	——— Case ——	(if known)	

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

SPOUSE	
/d.	
0026	
DEBTOR	SPOUSE
\$4,596.80	\$3,124.55
650.00	\$0.00
\$5,246.80	\$3,124.55
\$ 980.07 \$ 281.66 \$ 0.00 \$ 0.00	\$ 516.53 \$ 318.41 \$ 0.00 \$ 0.00
\$1,261.73	\$834.94
\$3,985.07	\$ 2,289.61
\$	\$0.00
\$	\$0.00
\$0.00	\$0.00
\$0.00	\$0.00
\$0.00	\$0.00
\$0.00	\$0.00
\$	\$0.00
\$0.00	\$0.00
\$0.00	\$0.00
\$3,985.07	\$ 2,289.61
\$	6,274.68_
	\$ nary of Schedules ry of Certain Liabi

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

36J (Officia Classe: 018 (222043 3	Doc 1	Filed 08/26/08	Entered 08/26/08 10:11:13	Desc Main
		Document	Page 21 of 50	

Document Page 21 of 50	1.15 Desc Main
In re Rene Miranda Case No	
	known)
SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDU	UAL DEBTOR(S)
Complete this schedule by estimating the average or projected monthly expenses of the debtor and t filed. Prorate any payments made biweekly, quarterly, semi-annually, or annually to show monthly rate. The calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.	
Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a labeled "Spouse."	a separate schedule of expenditures
1. Rent or home mortgage payment (include lot rented for mobile home)	\$1,600,00
a. Are real estate taxes included? Yes No	1,000.00
b. Is property insurance included? Yes No	
2. Utilities: a. Electricity and heating fuel	\$200.00
b. Water and sewer	\$50.00
c. Telephone	\$200.00
d. Other <u>Cable</u> , assesments	\$200.00
3. Home maintenance (repairs and upkeep)	\$200.00
4. Food	\$800.00
5. Clothing	\$200.00
6. Laundry and dry cleaning	\$60.00
7. Medical and dental expenses	\$250.00
8. Transportation (not including car payments)	\$900.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$200.00
10.Charitable contributions	\$50.00_
11.Insurance (not deducted from wages or included in home mortgage payments)	
a. Homeowner's or renter's	\$0.00_
b. Life	\$0.00
c. Health	\$0.00_
d.Auto	\$140.00
e. Other	\$0.00
12.Taxes (not deducted from wages or included in home mortgage payments)	
(Specify)	\$0.00
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)	
a. Auto	\$395.00_
b. Other	\$\$

if applicable, on the Statistical Summary of Certain Liabilities and Related Data) 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: None

20. ST	ATEMENT OF MONTHLY NET INCOME		

14. Alimony, maintenance, and support paid to others

15. Payments for support of additional dependents not living at your home

Association dues

16. Regular expenses from operation of business, profession, or farm (attach detailed statement)

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and,

a. Average monthly income from Line 15 of Schedule (Includes spouse income of \$2,289.61. See Schedule I)			6,274.68
b. Average monthly expenses from Line 18 above			6,415.00
c. Monthly net income (a. minus b.)	(Net includes Debtor/Spouse combined Amounts)	\$	-140.32

0.00

800.00

\$

0.00

0.00_

170.00

6,415.00

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court Northern District of Illinois

In re	Rene Miranda		Case No.	
		Debtor		
			Chapter	7

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A – Real Property	YES	1	\$ 170,000.00		
B – Personal Property	YES	3	\$ 9,200.00		
C – Property Claimed as exempt	YES	1			
D – Creditors Holding Secured Claims	YES	1		\$ 173,323.89	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	YES	2		\$ 0.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	3		\$ 89,816.62	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	1			\$ 6,274.68
J - Current Expenditures of Individual Debtors(s)	YES	1			\$ 6,415.00
ТОТ	FAL	15	\$ 179,200.00	\$ 263,140.51	

Official Exemple-Statistical Symmetry (FAMED) 08/26/08 Entered 08/26/08 10:11:13 Desc Main United States Barra page 23 of 50 Court Northern District of Illinois

In re	Rene Miranda	Case No.	
	Debtor		
		Chapter 7	

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. §101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount	
Domestic Support Obligations (from Schedule E)	\$	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$	0.00
Student Loan Obligations (from Schedule F)	\$	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$	0.00
TOTAL	\$	0.00

State the Following:

~ · · · · · · · · · · · · · · · · · · ·	
Average Income (from Schedule I, Line 16)	\$ 6,274.68
Average Expenses (from Schedule J, Line 18)	\$ 6,415.00
Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C Line 20)	\$ 8,170.03

State the Following:

state the Following.		
Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$ 102,669.58
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$ 0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$ 0.00
4. Total from Schedule F		\$ 89,816.62
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$ 192,486.20

Rene Miranda

Bankruptcy2008 @1991-2008, New Hope Software, Inc., ver. 4.4.2-720 - 30931 - PDF-XChange 2.5 DE

Debtor

(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _______ sheets, and that they are true and correct to the best of my knowledge, information, and belief. Signature: /s/ Rene Miranda August 25, 2008 Not Applicable (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Social Security No. Printed or Typed Name and Title, if any, (Required by 11 U.S.C. § 110.) of Bankruptcy Petition Preparer If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document. Address Signature of Bankruptcy Petition Preparer Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP _____ [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the ____ _____[corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief. Date ___ [Print or type name of individual signing on behalf of debtor.] [An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Case 08-22433

3 Doc 1 Filed 08/26/08 Entered 08/26/08 10:11:13 Desc Main

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In Re	Rene Miranda	Case No.	
		(if known)	Т

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

SOURCE		AMOUNT	
	Employment	103444.00	2007(db)
	Employment	89418.00	2006(db)
	Employment	86934.00	2005(db)
		0.00	2008(nfs)
		0.00	2007(nfs)
		0.00	2006(nfs)

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT		SOURCE
2007(db)	15779.00	C & M Miranda Corp. / Business
2006(db)	20754.00	C & M Miranda Corp. / Business
2008(nfs)	0.00	
2007(nfs)	0.00	

None

3. Payments to creditors

 \boxtimes

Complete a. or b., as appropriate, and c.

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS

AMOUNT PAID AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATES OF PAYMENTS

AMOUNT PAID AMOUNT STILL OWING None

 \boxtimes

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED DATE OF SEIZURE DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSESSION, FORECLOSURE SALE, TRANSFER OR RETURN DESCRIPTION AND VALUE OF PROPERTY

Toyota Financial Serv. P.o. Box 4102 Carol Stream, IL 60197 2/2008

Vehicle

6. Assignments and Receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case, except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR, IF ANY DATE OF GIFT DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES, AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

David P. Leibowitz Leibowitz Law Center 420 W. Clayton St. Waukegan, IL 60085 2008 \$2217.00

10. Other transfers

None |

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

None

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR
DESCRIPTION AND
VALUE OF PROPERTY OR
DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

Chase Bank Round Lake, IL 60073 Checking Account. Closing Balance: 0.00 2/2008

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF AMOUNT OF

SETOFF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

P.O. Box 8554 Rolling Meadows, IL 60008

Same

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Sites

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME NAME AND ADDRESS DATE OF ENVIRONMENTAL AND ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None

SITE NAME NAME AND ADDRESS DATE OF ENVIRONMENTAL AND ADDRESS OF GOVERNMENTAL UNIT NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None

NAME AND ADDRESS OF GOVERNMENTAL UNIT DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

NAME

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN **ADDRESS**

NATURE OF BUSINESS BEGINNING AND

ENDING DATES

C & Miranda Corp.

56-2480642

PO Box 8554 Rolling Meadows, IL 60008

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME

ADDRESS

[Questions 19 - 25 are not applicable to this case]

* * * * *

[If completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

August 25, 2008

Signature of Debtor

/s/ Rene Miranda

RENE MIRANDA

Date

ōΩ
20
=
ಡ
-XChg
C)
_
×
PDF.
₩.
\Box
_
ц.
30931
~
8
Ō,
\circ
m.
_
$\overline{}$
-720
<u>`</u>
` i `
n)
Λi
→
٧.
vt
٠.
e
2
ver
0
Ę
_
0
-
늄
-
>
#
0
Š
e S
e S
be S
e S
lope S
be S
lope S
w Hope S
w Hope S
w Hope S
w Hope S
w Hope S
w Hope S
w Hope S
w Hope S
w Hope S
w Hope S
-2008, New Hope S
-2008, New Hope S
-2008, New Hope S
-2008, New Hope S
-2008, New Hope S
-2008, New Hope S
-2008, New Hope S
-2008, New Hope S
-2008, New Hope S
-2008, New Hope S
-2008, New Hope S
-2008, New Hope S
2008 ©1991-2008, New Hope S
2008 ©1991-2008, New Hope S
2008 ©1991-2008, New Hope S
-2008, New Hope S
cy2008 @1991-2008, New Hope S
cy2008 @1991-2008, New Hope S
cy2008 @1991-2008, New Hope S
cy2008 @1991-2008, New Hope S
ruptcy2008 @1991-2008, New Hope S
ruptcy2008 @1991-2008, New Hope S
ruptcy2008 @1991-2008, New Hope S
ankruptcy2008 @1991-2008, New Hope S
ankruptcy2008 @1991-2008, New Hope S
ruptcy2008 @1991-2008, New Hope S

0 continuation sheets attached

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §152 and 3571

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section.

Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110(c).)
If the bankruptcy petition preparer is not an individual, state the name, title (if a partner who signs this document.	ny), address, and social security number of the officer, principal, responsible person, or
Address	
X Signature of Bankruptcy Petition Preparer	 Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

Form B8 (Officia Carse) 08-22433 Doc 1 Filed 08/26/08 Entered 08/26/08 10:11:13 Desc Main Document Page 34 of 50 UNITED STATES BANKRUPTCY COURT

Northern L	DISTRICT OF TH	inois	

n re Rene Miranda	,	Case No.			
Debtor		Chapter 7			
СНА	PTER 7 INDIVIDUAL DEB	TOR'S STATEM	IENT OF INTEN	TION	
I have filed a schedule of	f assets and liabilities which includ f executory contracts and unexpire ing with respect to the property of	d leases which inclu	des personal property	subject to an unexp	pired lease.
Description of Secured Property	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be Reaffirmed pursuant to 11 U.S.C. § 524(c
Town home	Wells Fargo Mortgage		√		1
Town home	Chase Home Equity Line				√
2007 Kawaski Ninja / 3000	HSBC Bank USA, N.A.				\ \ \
Description of Leased Property	Lessor's Name	Lease will be assumed pursuant to 11 U.S.C. § 362(h)(1)(A)			
NONE]		
Date: August 25, 2008	/s/ Rene Mi	iranda			

Signature of Debtor

RENE MIRANDA

Bankruptcy2008 @1991-2008, New Hope Software, Inc., ver. 4.4.2-720 - 30931 - PDF-XChange 2.5 DE

CERTIFICATION OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

have provided the debtor with a copy of this document and the notices and r	parer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and required under 11U.S.C. §§ 110(b), 110(h), and 342(b); (3) if rules or guidelines have rvices chargeable by bankruptcy petition preparers, I have given the debtor notice of the cepting any fee from the debtor, as required in that section.		
Printed or Typed Name of Bankruptcy Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110(c).)		
If the bankruptcy petition preparer is not an individual, state the nate responsible person or partner who signs this document.	me, title (if any), address, and social security number of the officer, principal		
Address			
X			
Signature of Bankruptcy Petition Preparer	Date		

Names and Social Security Numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. §156.

UNITED STATES BANKRUPTCY COURT Northern District of Illinois

NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

<u>Chapter 7</u>: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239) Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of [Non-Attorney] Bankruptcy Petition Preparer

I, the [non-attorney] bankruptcy petition preparer signing the debtor's petition, hereby certify that I delivered to the debtor

Printed Name and title, if any, of Bankruptcy Petition Preparer	Social Security number (If the bankruptcy petition
Address:	preparer is not an individual, state the Social Security
	number of the officer, principal, responsible person, or partner of
	the bankruptcy petition preparer.) (Required
X	by 11 U.S.C. § 110.)
Signature of Bankruptcy Petition Preparer or officer,	
principal, responsible person, or partner whose Social	

Certificate of the Debtor

I (We), the debtor(s), affirm that I (we) have received and read this notice.

this notice required by § 342(b) of the Bankruptcy Code.

Security number is provided above.

Rene Miranda	χ /s/ Rene Miranda August 25, 2	2008
Printed Name(s) of Debtor(s)	Signature of Debtor Date	_
Case No. (if known)	X	
	Signature of Joint Debtor (if any) Date	

American Express
P.O. Box 360001
Ft. Lauderdale, FL 33336-0001

American Express P.O. Box 360001 Ft. Lauderdale, FL 33336-0001

Carson Pirie Scott P.O. Box 17264 Baltimore, MD 21297

Chase P O Box 36520 Louisville, KY 40233-6520

Chase P.O. Box 15153 Wilmington, DE 19886

Chase P.O. Box 15153 Wilmington, DE 19886

Chase P.O. Box 15292 Wilmington, DE 19886

Chase P.O. Box 15292 Wilmington, DE 19886

Chase Home Equity Line P.o. Box 24714 Columbus, OH 43224

Discover Card Services P.O. Box 30395 Salt Lake City, UT 84130-0395

Esmeralda Miranda

HSBC Bank USA, N.A. P.O. Box 2013 Buffalo, NY 14240

Retail Services P.O. Box 17602 Baltimore, MD 21297

Toyota Financial Serv. P.o. Box 4102 Carol Stream, IL 60197

Visa P.O. Box 4521 Carol Stream, IL 60197

Wells Fargo Mortgage P.o. Box 660455 Dallas, TX 75266

Case 08-22433 Doc $1_{UNIFILEd}$ DA/26/08 $1_{UNIFILEd}$ Desc Main Document $1_{UNIFILED}$ Desc Main

Hole	der of Security		Number Registered	Type of Interest
		List of Equit	y Security Holders	
			Chapter	7
		Debtor	Case No.	
In re	Rene Miranda	e Miranda ,		

B203 12/94

United States Bankruptcy Court

	Northern District of I	Ilinois			
	In re Rene Miranda	Case	No		
		Chapt	ter	7	
	Debtor(s)				
	DISCLOSURE OF COMPENSATION OF ATTORN	EY FO	R DEBTOI	R	
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the and that compensation paid to me within one year before the filing of the petition rendered or to be rendered on behalf of the debtor(s) in contemplation of or in contemplation.	in bankri	uptcy, or agre	ed to be paid to me, for ser	
	For legal services, I have agreed to accept	\$	2,217.00	_	
	Prior to the filing of this statement I have received	\$	2,217.00	_	
	Balance Due	\$	0.00	_	
2.	The source of compensation paid to me was:				
	☑ Debtor ☐ Other (specify)				
3.	The source of compensation to be paid to me is:				
	☐ Other (specify)				
4. asso	$\stackrel{f L}{ ext{M}}$ I have not agreed to share the above-disclosed compensation with any other ciates of my law firm.	er person	unless they a	are members and	
of m	I have agreed to share the above-disclosed compensation with a other pers y law firm. A copy of the agreement, together with a list of the names of the people				es
5.	In return for the above-disclosed fee, I have agreed to render legal service for al	ll aspects	of the bankru	uptcy case, including:	
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor inb. Preparation and filing of any petition, schedules, statements of affairs and plant		•		

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

By agreement with the debtor(s), the above-disclosed fee does not include the following services: Representation in adversary and contested matters

	CERTIFICATION
I certify that the foregoing is a complete st debtor(s) in the bankruptcy proceeding.	atement of any agreement or arrangement for payment to me for representation of the
August 25, 2008	/s/ David P. Leibowitz
Date	Signature of Attorney
	Leibowitz Law Center
	Name of law firm

Ļ	Ι	
۵	_	
Ļ	,	
1	'	
(٦	٩
	٩	
	t	į
	9	
	2	
	•	
١	-	
ì	×	١
r	ļ	
Ę	I	
2		
۶	1	
	ı	
c	•	
۶	2	
(-	
C	•	
	ì	
	ľ	
9	١	١
ĵ	1	
,	ζ	į
`	١	
3	V	ļ
4	₹	t
		,
	ā	
	S	
	c	
	2	
	d	
	d	
	d	
	d	
	d	
	d	
	d	
	d	
	d	
7	d	
T. C. C. T.	d	
T. C. C. T.	d	
TT 0 0	d	
T. C. C. T.	d	
N. T. O. C. T.	d	
T. C. C. T.	d	
T. C. C. T.	d	
1 000	d	
2 2 2	d	
1 0000	d	
1 0000 L	d	
TI 0000 10	d	
TT II	d	
1001 0000 NT	d	
TT II	COLOR NAME AND A COLOR OF THE PARTY OF THE P	
TI 0000 1001@ C	COLOR NAME AND A COLOR OF THE PARTY OF THE P	
TI 0000 1001@	COLOR NAME AND A COLOR OF THE PARTY OF THE P	
11 0000 10010 000	COLOR NAME AND A COLOR OF THE PARTY OF THE P	
11 0000 10010 00	COLOR NAME AND A COLOR OF THE PARTY OF THE P	
11 0000 10010 000	COLOR NAME AND A COLOR OF THE PARTY OF THE P	
11 0000 10010 0000	CONTRACT NOT A CONTRACT OF THE	
11 0000 10010 0000	CONTRACT NOT A CONTRACT OF THE	
11 0000 10010 0000	CONTRACT NOT A CONTRACT OF THE	
11 0000 10010 0000	CONTRACT NOT A CONTRACT OF THE	
11 0000 10010 0000	CONTRACT NOT A CONTRACT OF THE	
11 0000 10010 0000	COLOR NAME AND A COLOR OF THE PARTY OF THE P	

	According to the calculations required by this statement:
In re Rene Miranda	The presumption arises.
Debtor(s)	☑ The presumption does not arise.
Case Number:	(Check the box as directed in Parts I, III, and VI of this statement.)

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedule I and J, this statement must be completed by every individual Chapter 7 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. EXCLUSION FOR DISABLED VETERANS AND NON-CONS	UMER DEE	BTORS		
1A	If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.				
TA.	☐ Veteran's Declaration. By checking this box, I declare under penalty of perjury that I and defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)).	h I was on acti	ve duty (as		
If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII complete any of the remaining parts of this statement.					
1B	Declaration of non-consumer debts. By checking this box, I declare that my debts are	not primarily co	onsumer debts.		
	Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b) (7	') EXCLUS	ION		
	Marital/filing status. Check the box that applies and complete the balance of this part of this	s statement as	directed.		
	a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.				
	b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only Column A ("Debtor's Income") for Lines 3-11.				
2	c. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B (Spouse's Income) for Lines 3-11.				
	d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column for Lines 3-11.	B ("Spouse's	Income")		
	All figures must reflect average monthly income received from all sources, derived during the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.	Column A Debtor's Income	Column B Spouse's Income		
3	Gross wages, salary, tips, bonuses, overtime, commissions.	\$ 4,952.06	\$ 3,217.97		

4	Line a a than on attachm	e from the operation of a business, profession of a business, profession of a business, profession of e business, profession or farm, enter aggregate numbert. Do not enter a number less than zero. Do not ess expenses entered on Line b as a deduction in	of Line 4. If bers and provinclude any	you operate mo vide details on a	ore						
	a.	Gross receipts	\$	0.	00						
	b.	Ordinary and necessary business expenses	\$	0.	00						
	C.	Business income	Subtract Lir	ne b from Line a	a	\$	0.00	\$	0.00		
5	differen	nd other real property income. Subtract Line b from the appropriate column(s) of Line 5. Do not enclude any part of the operating expenses entered	ter a number	less than zero.							
	a.	Gross receipts	\$	0.	00						
	b.	Ordinary and necessary operating expenses	\$	0.	00						
	C.	Rent and other real property income	Subtract Lir	ne b from Line a	a	\$	0.00	\$	0.00		
6	Interes	t, dividends and royalties.				\$	0.00	\$	0.00		
7	Pension	and retirement income.				\$	0.00	\$	0.00		
8	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9.			\$	0.00	\$	0.00				
9	However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: Unemployment compensation claimed to be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$ 0.00				in		0.00		0.00		
	a bene	fit under the Social Security Act Debtor \$	Spo	use \$0.00		\$	0.00	\$	0.00		
10	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payment paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.			nents ocial as a							
	a.			\$ 0.00							
	b.	Londonton on Line 10		\$ 0.00		\$	0.00	\$	0.00		
		I and enter on Line 10	Add Linco 2 *	aru 10 in		Ψ	0.00	Ψ	0.00		
11		al of Current Monthly Income for § 707(b)(7). A, and, if Column B is completed, add Lines 3 throug			•	\$	4,952.06	\$	3,217.97		
12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.			dd	\$			8,170.03			
	•	Part III. APPLICATION OF	§ 707(h)	(7) EXCL	JSIC	N N			5, 5.55		
	A							ı			
13		ized Current Monthly Income for § 707(b)(7). It 12 and enter the result.	viuitipiy the ar	nount from Lin	e 12 b	y ine	=	\$	98,040.36		

14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)				
	a. Enter debtor's state of residence: Illinois b. Enter debtor	\$	77,634.00		
	Application of Section 707(b)(7). Check the applicable box and pro-	ceed as directed.	!		
15	The amount on Line 13 is less than or equal to the amount on not arise" box at the top of page 1 of this statement, and complete				
	The amount on Line 13 is more than the amount on Line 14.	. Complete the remaining parts of	of this s	tatement.	
	Complete Parts IV, V, VI and VII of this statement or	nly if required. (See Line 15).		
	Part IV. CALCULATION OF CURRENT MONTHL	Y INCOME FOR § 707(b) (2))	
16	Enter the amount from Line 12.		\$	8,170.03	
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line listed in Line 11, Column B that was NOT paid on a regular basis for the debtor or the debtor's dependents. Specify in the lines below the basis fincome (such as payment of the spouse's tax liability or the spouse's sup debtor or the debtor's dependents) and the amount of income devoted to list additional adjustments on a separate page. If you did not check box				
	a. Hinsdale Bank - auto loan	\$ 275.00			
	b. J.C. Penney's credit card				
	c. Carson Pririe Scott credit card	\$ 50.00			
	Total and enter on Line 17. *See cont. pg for additional iter	ns	\$	775.00	
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line	e 16 and enter the result.	\$	7,395.03	
	Part V. CALCULATION OF DEDUCTIO	NS FROM INCOME			
	Subpart A: Deductions under Standards of the Ir	nternal Revenue Servi	ce (II	RS)	
19A	National Standards: food, clothing and items. Enter in Line 19A the National Standards for Food, Clothing and Other Items for the applicable information is available at www.usdoj.gov/ust/ or from the clerk of the b	household size. (This	\$	1,370.00	
19B	and enter the result in Line 19B.				
	Household members under 65 years of age Household members 65 years of age or older a1. Allowance per member 57.00 a2. Allowance per member 144.00				
	a1. Allowance per member 57.00 a2. Allowance per b1. Number of members 3 b2. Number of n				
	c1. Subtotal 171.00 c2. Subtotal	144.00			
	171.00 CZ. Gubtotal	111.00	\$	315.00	

001	Local Standards: housing and utilities; non-mortgage exp		е		
20A	IRS Housing and Utilities Standards; non-mortgage expenses for the appsize. (This information is available at www.usdoj.gov/ust/ or from the classical content of the standards of the standards of the appsize of the appsi	\$	642.00		
20B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero. LAKE COUNTY				
	a. IRS Housing and Utilities Standards; mortgage/rental expense	\$ 1,738.00			
	b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$ 1,600.00			
	c. Net mortgage/rental expense	Subtract Line b from Line a	\$	138.00	
21	Local Standards: housing and utilities; adjustment. If you cout in Lines 20A and 20B does not accurately compute the allowance to the IRS Housing and Utilities Standards, enter any additional amount to entitled, and state the basis for your contention in the space below:	which you are entitled under	\$	0.00	
22A	Local Standards: transportation; vehicle operation/public You are entitled to an expense allowance in this category regardless of woperating a vehicle and regardless of whether you use public transportate. Check the number of vehicles for which you pay the operating expenses expenses are included as a contribution to your household expenses in 0 1 2 or more. CHICAGO If you checked 0, enter on Line 22A the "Public Transportation" amount Transportation. If you checked 1 or 2 or more, enter on Line 22A the "IRS Local Standards: Transportation for the applicable number of vehicles Metropolitan Statistical Area or Census Region. (These amounts are avaing or from the clerk of the bankruptcy court.)	whether you pay the expenses of tion. Is or for which the operating Line 8. If from IRS Local Standards: Operating Costs" amount from les in the applicable	\$	217.00	
22B	Local Standards: transportation; additional public transports for a vehicle and also use public transportation are entitled to an additional deduction for your public transports that you are entitled to an additional deduction for your public transports the "Public Transportation" amount from IRS Local Standards: Transportation are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy country.	sportation, and you contend ation expenses, enter on Line sportation. (This amount is	\$	0.00	
23	Local Standards: transportation ownership/lease expense number of vehicles for which you claim an ownership/lease expense. (You ownership/lease expense for more than two vehicles.) 1 2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRST Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bothe total of the Average Monthly Payments for any debts secured by V subtract Line boff from Line a and enter the result in Line 23. Do not enter a. IRS Transportation Standards, Ownership Costs b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42 C. Net ownership/lease expense for Vehicle 1	S Transportation Standards: e bankruptcy court); enter in Lin ehicle 1, as stated in Line 42; er an amount less than zero. \$ 489.00	9	369.00	

ā
T I
43
ú
g
Ħ
ñ
XC
×
宀
PDF
1
31
6
30
720
5
4
\rightarrow
4.
ver
>
್ಟ್
Ĕ
are
20
Α,
Ę.
S
e
ō
Ĭ
3
ě
Z
οć
0
20
Ξ
6
6
0
8
0
2
Š
5
ā
르
놛
ਫ਼
щ

Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdbj.gov/ust/ or from the clerk of the bankruptcy count), enter in Line a the total of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42: subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42: subtract Line b from Line a stated in Line 42. Do not enter an amount less than zero.				1		
(available at www.usdoi.gov/ust/ or from the clerk of the bankruptcy court): enter in Line b the total of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero. a. IRS Transportation Standards, Ownership Costs \$ 489.00 b. Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42. c. Net ownership/lease expense for Vehicle 2 \$ subtract Line b from Line a. Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment. Enter the total average monthly payroll deductions that are required for your employment. Enter the total average monthly payroll deductions that are required for your employment. Enter the total average monthly payroll deductions that are required for your employment. Such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as often actually pay for term life insurrance. Enter total average monthly premiums that you actually pay for term life insurrance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total amount that you actually expend for education that is a condition of employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other education that is a condition of employment and for education that is a condition of employment						
a. IRS Transportation Standards, Ownership Costs \$ 489.00 b. Average Monthly Payment for any debts secured by Vehicle 2, a stated in Line 42 c. Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a. Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insu		Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of that Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b				
25 Other Necessary Expenses: takes, Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. 26 Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as soluntary 401 (k) contributions. 27 Other Necessary Expenses: life insurance. Enter total average monthly permiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. 28 Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. 29 Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. 30 Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. 31 Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on the payments of the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 198. Do not include	24		i			
Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include paym			\$ 0.00			
for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services enter the total average monthly amount that you actually pay for telecomm		c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$	0.00	
average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401 (k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 198. Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously de	25	for all federal, state and local taxes, other than real estate and sales taxes,	such as income taxes, self em-	\$	1,432.75	
actually pay for term life insurance for yourself. Do not include premiums on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 198. Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.	26	average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as				
you are required to pay pursuant to court order or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. **Solon** Total Expenses Allowed under LDS Standards. Extent he total of lines 10 through 32.	27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums on your dependents, for				
mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. Total Expenses Allowed under LDS Standards. Enter the total efficience 10 these 10 these 20.	28	you are required to pay pursuant to court order or administrative agency, such as spousal or child				
expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other educational payments. Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. Total Expenses Allowed upday LDS Standards. Enter the total of Lines 10 through 23.	29	mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or			0.00	
actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings accounts listed in Line 34. 32 Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. 50.00	30	expend on childcare—such as baby-sitting, day care, nursery and preschool. Do not include other			0.00	
amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted. 50.00	31	actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Lin 19B. Do not include payments for health insurance or health savings			150.00	
Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32 \$ 5,483.75	32	amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service—such as pagers, call waiting, caller id, special long distance, or internet service—to the extent necessary for your health and welfare or that of your dependents. Do not include any				
	33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32			5,483.75	

Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 19-32.					
	Health Insurance, Disability Insurance and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.				
	a.	Health Insurance	\$ 238.33		
	b.	Disability Insurance	\$ 0.00		
34	C.	Health Savings Account	\$ 0.00	\$	238.33
	lfy	you do not actually expend this total amount, state your actual ace below: 0.00	average expenditures in the	3	230.33
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.				0.00
36	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.			\$	0.00
37	Home energy costs Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.			\$	0.00
38	Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.			\$	0.00
39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.			\$	0.00
40	Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170 (c)(1)-(2)			\$	0.00
41	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40.				238.33

Subpart C: Deductions for Debt Payment							
	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total Average Monthly payments on Line 42.						
42		Name of Creditor	Property Securing the Debt		Average Monthly Payment	Does payment include taxes or insurance?	
	a.	Wells Fargo Mortgage	Residence	\$	1,300.00	yes 🗆 no	
	b.	Chase Home Equity Lin	Residence	\$	300.00	yes 🚺 no	
	C.	HSBC Bank USA, N.A.	Motorcycle	\$	116.00	□ yes ▼ no	
					al: Add Line and c		\$ 1,716.00
43	primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.						
43		Name of Creditor	Property Securing the Deb	t	1/60th of th	ne Cure Amount	
	a.				\$	0.00	
	b.				\$	0.00	
	C.				\$	0.00	\$ 0.00
44	Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 28. Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting					\$ 0.00	
	administrative expense.						
	a. Projected average monthly Chapter 13 plan payment.		\$	1,104.00			
45	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) X 6.3 %		6.3 %				
	C. Average monthly administrative expense of Chapter 13 case Total: Multiply Lines a and b				\$ 69.55		
46	Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.					\$ 1,785.55	
	Subpart D: Total Deductions from Income						
47	Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.					\$ 7,507.63	

Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION								
48	7.07.00							
49	Enter the amount from Line 47 (Total of all deductions allowed under §	<u> </u>	\$	7,507.63				
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 a result.		\$	-112.60				
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 5 number 60 and enter the result.	60 by the	\$	-6,756.00				
	Initial presumption determination. Check the applicable box and proceed as direct	ed.						
	The amount on Line 51 is less than \$6,575. Check the box for "The presumpt page 1 of this statement, and complete the verification in Part VIII. Do not complete the	e remainder of F	art VI	·				
52	The amount set forth on Line 51 is more than \$10,950. Check the "Presun page 1 of this statement, and complete the verification in Part VIII. You may also comp the remainder of Part VI.							
	The amount on Line 51 is at least \$6,575, but not more than \$10,950. VI (Lines 53 through 55).	Complete the re	emaino	ler of Part				
53	Enter the amount of your total non-priority unsecured debt		\$	N.A.				
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0 enter	.25 and	\$	N.A.				
	Secondary presumption determination. Check the applicable box and proceed as	directed.						
55	The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.							
	Part VII: ADDITIONAL EXPENSE CLAIM:	S						
	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.							
56	Expense Description	Monthly A	mount					
30	a.	\$	0.0	0				
	b.	\$	0.0	0				
	c.	\$	0.0	0				
	Total: Add Lines a, b and c		0.0	0				
Part VIII: VERIFICATION								
	I declare under penalty of perjury that the information provided in this statement is true are both debtors must sign.)	nd correct. (If the	is a joi	nt case,				
	Date: August 25, 2008 Signature: /s/ Rene Miranda							
57	Date: August 25, 2008 Signature:(Joint Debtor, if any)							

Income Month 1		Income Month 2			
Gross wages, salary, tips	4,952.06	3,217.97	Gross wages, salary, tips	4,952.06	3,217.9
Income from business	0.00	0.00	Income from business	0.00	0.0
Rents and real property income 0.00 0.00			Rents and real property income	0.00	0.0
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0.0
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0.0
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0.0
Unemployment	0.00	0.00	Unemployment	0.00	0.0
Other Income	0.00	0.00	Other Income	0.00	0.0
Income Month 3			Income Month 4		
Gross wages, salary, tips	4,952.06	3,217.97	Gross wages, salary, tips	4,952.06	3,217.9
Income from business	0.00	0.00	Income from business	0.00	0.0
Rents and real property income 0.00 0.00		Rents and real property income	0.00	0.	
Interest, dividends	Interest, dividends 0.00 0.00 Pension, retirement 0.00 0.00 Contributions to HH Exp 0.00 0.00		Interest, dividends	0.00	0.
Pension, retirement			Pension, retirement	0.00	0.
Contributions to HH Exp			Contributions to HH Exp	0.00	0.
Unemployment	0.00	0.00	Unemployment	0.00	0.
Other Income	0.00	0.00	Other Income	0.00	0.
Income Month 5			Income Month 6		
Gross wages, salary, tips	4,952.06	3,217.97	Gross wages, salary, tips	4,952.06	3,217.
Income from business	0.00	0.00	Income from business	0.00	0.0
Rents and real property income	0.00	0.00	Rents and real property income	0.00	0.
Interest, dividends	0.00	0.00	Interest, dividends	0.00	0.
Pension, retirement	0.00	0.00	Pension, retirement	0.00	0.
Contributions to HH Exp	0.00	0.00	Contributions to HH Exp	0.00	0.
Unemployment	0.00	0.00	Unemployment	0.00	0.
Other Income	0.00	0.00	Other Income	0.00	0.

Additional I tems as Designated, if any

Line 17: Target credit card	200.00
Line 17: Kohl's credit card	50.00
Line 17: Ikea credit card	50.00
Line 17: Bank of America credit card	100.00

Remarks